

EXECUTIVE LOBBYING REGISTRATION/ RENEWAL FOR THE YEAR OF 2007

		(Fitt to	i year.)						:73-52-Q
	orn and return v Dr., 3 rd Floor, B	Instructi with \$110 regist latest Rouge, LA	ration fee to d		Dihics,	100	14 2 14 2 1110 1100	2005 1340 1	A COUNTY OF THE PARTY OF THE PA
Initial regist lobbyist or (rations must be (2) first action :	e submitted with requiring registra wal is submitted	ation. Regist	rations expire	e as of				
NAME K	42AR	Shurley	Pam	<u> </u>	33	MI	2/	0615	- O.C
	Δ.	15 92	N 44	20			27()OT:	第 9cc
BUSINESS I	HONE	25-93 Area Code	and Phone Nur	niper		 :: 1			<u> </u>
		12.072.07.70.00	/#####################################	177,03					20 6
FAXNUMB	ER 225	5-930	<u>-777</u>	7) ≱ (5)
									8 8
BUSINESS	ADDDESS .	7884 OFFICE	E PARK BI	VD., SUI	TE 200	BATON	ROUGE	LA	3 809
BUSINESS	WDDKE33		Street	and No.		City		State	Zip
MAILING A	DDRESS	7884 OFFICE	e park bi	.vo., sui	TË 200	BATON	ROUGE	LA	70809
			Street	and No.	14111111	City		State	Zip
EMPLOYER	BELLSOI	CTH BUSINES	SS SYSTEM	15, INC.	-				
			COR DADE	BESTD. S	TITTE 200	BATON	ROUGE	LA	70809
EMPLOYER	'S ADDRESS	1884 OFF	LCE PARK		DETE SOO				
EMPLOYER	us address		and No.	City	State		Złp		
LIST BELO	W (a) Names of	Street of persons, groups, of business coch la o	and No. or organization	City s which you re	State epicacent; (b) the	c address of a	Zip sach such p	ersoo, ga	5.2 1. 5 0000000
LIST BELO	W (a) Names of n; (c) the type of clac pays you to	Street of persons, groups, of business coch la o	and No. or organizations engaged in or t	City s which you re be purpose or	State spreason; (b) the function of the	c address of e organization	Zip each such p or group;	ersoo, gn (d) wheth	5.2 1.
LIST BELOT you represent or somecome of	W (a) Names of it; (c) the type of clac pays you to BELLSOL	Street of persons, groups, of business coch is of lobby.	and No. or organizations cagaged in or 0	City s which you re he purpose or ITS SUB	State spreacent; (b) the function of the	c address of e organization S AND Al	Zip such such p or group; FFILIAT	ersoo, gn (d) wheth	5.2 1. 5 0000000
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Form 504, Rev. 7404

Qui: 2/22/07/9%

EXECUTIVE LOBBYING REGISTRATION FORM



2	Name
	Address
	Business or purpose
	Does this person puy you?
	If No, who pays you?
3.	Name
	Address
	Business or purpose
	Does this person puy you?
	If No, who pays you?
4.	Name
	Address
	Business or purpose
	Does this person pay you?
	If No, who pays you?

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.

Kyga Shu

 $P_{\text{age}} \underline{\mathcal{Q}}_{\text{of}} \underline{\mathcal{Q}}_{\text{-}}$



Farm 504, Rev. 2/04